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ABSTRACT

This concise guide to resources on substance abuse is intended for those teaching in academic family medical education and reviews written and audiovisual materials, experiential learning, continuing medical education, and networking resources. Section 1, on written and audiovisual materials, lists 36 resources with a description of each and availability information for some. Section 2, on experiential learning includes descriptions of experiences available at several treatment centers, formal rotations at residency programs, attendance at self-help group meetings, and substance abuse fellowships. The section on continuing education lists four short substance abuse courses sponsored by organizations such as the American Society of Addiction Medicine. Included are descriptions of the programs and contacts for obtaining more information. Section 4, on networking resources, describes 13 organizations, their mission, materials available, meetings, and services. In addition this section includes a list of information sources: major organizations such as the National Clearinghouse for Alcohol and Drug Information, professional journals in substance abuse. A final section covers other teaching resources and lists curriculum guides and resource manuals. Four appendices are attached including a membership list of Society of Teachers of Family Medicine working in special interest groups, summaries of seven health professions projects, and a list of the 10 curriculum projects and authors. (JB)

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TEACHING ABOUT SUBSTANCE ABUSE: A RESOURCE MANUAL FOR FACULTY DEVELOPMENT

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INTRODUCTION

We have attempted to include materials, information and resources which would assist a faculty member to learn more about substance abuse, from both a clinical and educational viewpoint. Much of this information was initially accumulated during a part-time Faculty Development Fellowship co-sponsored by the Society of Teachers of Family Medicine (STFM), the National Institute on Alcoholism and Alcohol Abuse (NIAAA) and the National Institute on Drug Abuse (NIDA) in which the authors participated.

This guide is intended to be practical and concise, not necessarily comprehensive. The style will be informal and include tips and comments from the authors. Many of the materials have been selected from those found useful by the participants in the Faculty Development Fellowship. References and contact people are listed where available for those learners who desire more information about a specific topic.

This information is intended to be used by physicians and others involved with medical education to plan personal faculty development activities and assist in teaching about substance abuse. The guide was developed within the context of academic family medicine, but much of the information should be of interest to faculty in any medical specialty, especially in primary care. It is anticipated that faculty members will selectively utilize the information and resources which are relevant to their own needs. Given the time and interest, we believe that most faculty members by using this guide can enhance their knowledge and skills about substance abuse and become important clinical and teaching resources in their own departments and programs.

Rev 9/89

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SECTION I

WRITTEN AND AUDIOVISUAL MATERIALS

I. WRITTEN MATERIALS

An extensive literature exists in this area. The following are some examples of materials found useful by the faculty development fellows.

A. TEXTS

1. Alcoholics Anonymous: Alcoholics Anonymous. New York:Alcoholics Anonymous World Services, 1976.

This is the "Big Book" of AA and contains the steps and principles of AA, along with personal case histories of some of the early members. This book and other AA material is readily available at your local AA office or from:

AA General Services Office
Box 459 Grand Central Station
New York, NY 10163

2. Alcoholics Anonymous: Twelve Steps and Twelve Traditions; Alcoholics Anonymous World Services, 1976.
3. Barnes HN, Aronson M, Delbanco TL, eds. Alcoholism:A Guide for the Primary Care Physician. New York: Springer-Verlag, 1987.

A practical primary care approach to the early detection and care of the alcoholic patient, with emphasis on outpatient management. This monograph was written and edited mostly by general internists and focuses on the individual patient with little attention to the family system. It deals largely with screening, presenting the diagnosis, and working with denial.

4. Deveny P, Saunders S. Physicians' Handbook for Medical Management of Alcohol and Drug Related Problems. Addiction Research Foundation, 33 Russell St, Toronto, Canada M5S2S1;1986. Telephone Number: (416) 595-6056
5. Scheiber SC, Doyle BB, eds. The Impaired Physician. Plenum Medical Book Co; NY, 1983.

6. Wilford BB, ed. American Medical Society on Alcoholism and Other Drug Dependencies' Review Course Syllabus, 1987.

This is a comprehensive collection of articles and outlines which served as a syllabus for the AMSAODD annual review course in 1987-89. This syllabus will be revised periodically for use with future review courses. Since the last review course, AMSAODD has changed its name to the American Society of Addiction Medicine (ASAM). To check on availability, contact:

ASAM
12 West 21st St
New York, NY 10010
(212) 206-6770

7. Family Medicine Curriculum Guide to Substance Abuse, 1984. Task Force on Substance Abuse, Society of Teachers of Family Medicine

This useful monograph contains much information about clinical aspects of substance abuse as well as many teaching strategies. It was published in 1984, so some references are dated. The text is printed in poor quality dot matrix format, but this manual is still a good resource.

For more information, contact:

The Society of Teachers of Family Medicine
8880 Ward Pkwy
PO Box 8729
Kansas City, MO
(800) 274-2237

8. Mooney AJ, Martin C. Alcohol and Drug Abuse. American Academy of Family Physicians' Home Study Self-Assessment Monograph No. 107. April 1988.
10. Haberman PW, Bissell L. Alcoholism in the Professions. Oxford Univ Press; NY; Oxford; 1984.
11. Senay EC. Substance Abuse Disorders in Clinical Practice. John Wright; 1983.
12. Schuckit MA. Drug and Alcohol Abuse: A Clinical Guide to Diagnosis and Treatment. Plenum Press, 2nd ed; New York; 1984.
13. Schonberg SK, ed. Substance Abuse: A Guide for Health Professionals, 1988. American Academy of Pediatrics.

This monograph was produced by the American Academy of Pediatrics and the Center for Advanced Health Studies. It deals with many issues of adolescent alcohol and other drug

abuse, including evaluation, laboratory testing, and ethical/legal considerations. Perhaps the most useful are the sections on specific drugs, describing the epidemiology, pharmacology, health consequences, lab evaluation and treatment for all the commonly abused drugs.

Available from:

American Academy of Pediatrics
141 Northwest Point Boulevard
PO Box 927
Elk Grove Village, IL 60009

14. Whitfield CL, David JE, Barker LR. "Alcoholism" in Principles of Ambulatory Medicine. Barker LR, Burton JR, Zieve PD (eds). Baltimore, Williams & Wilkins, 1986.

This is a very good and concise review. Other texts in primary care medicine often contain useful sections about substance abuse.

15. Jaffe JH. "Drug addiction and drug abuse" in: Gilman AG, Goodman LS, Gilman A, eds. The Pharmacological Basis of Therapeutics. (7th ed) New York: Macmillan, 1985: 532-81.

Comprehensive review of the pharmacology of drug addiction and abuse from an "old standard".

B. ARTICLES

1. Baird M. Chemical dependency: A protocol for involving the family. Fam Sys Med 1985; 3(2):216-220.

Some specific steps to follow in counselling alcoholic families.

2. Clark W. Alcoholism: Blocks to diagnosis and treatment. Am J Med 1981; 71:275-286.

A classic article describing physicians' attitudes which impair the ability to treat alcoholic patients.

3. Pediatric Clinics of North America. April 1987

The entire issue is devoted to substance abuse, primarily in adolescents. The article by Dr. Anglin about interviewing adolescents is excellent.

4. Weinberg J. Interview techniques for diagnosing alcoholism. Am Fam Phys 1974; 9:107-115.

Very practical and simple hints to interviewing.

5. Medical Clinics of North America 1984: 68 (1).

The entire issue is devoted to the medical consequences of alcohol abuse.

6. Identifying and motivating the alcoholic. Patient Care, Dec 15, 1986: 59-87.

7. Milhorn HT. The diagnosis of alcoholism. Amer Fam Physician 1988; 37(6): 175-183.

This nice article describes several useful and commonly mentioned methods for diagnosing alcoholism, including the CAGE, SMAST, lab tests and the NCA criteria.

8. Mayer J, Filstead WJ. The adolescent alcohol involvement scale: an instrument for measuring adolescents' use and misuse of alcohol. J Stud Alcohol 1979; 40(3): 291-300.

This article describes a 14 item self-administered written questionnaire for adolescents to assess their involvement with alcohol. It is one of only a few instruments which have been validated and reported in the scientific literature which may be useful for screening adolescents in a primary care setting.

9. Cregler LL, Mark H. Medical complications of cocaine abuse. NEJM 1986; 315(23):1495-1500.

10. Treatment of acute drug abuse reactions. The Medical Letter 1987; 29(743): 83-86.

11. Mulry JT. Codependency: A family addiction. Amer Fam Physician 1987; 35(4): 215-219.

This article provides a brief review of the concept of codependency and the roles that members of alcoholic family often assume.

12. Bigby JA, Barnes HN, Girard DE. Annotated bibliography for general internists. J Gen Int Med 1988; 3: 306-311.

This is nice, concise, fairly recent annotated bibliography.

C. Resource Manual for Alcohol and Other Drug Abuse Education in Family Medical School and Residency Programs. US Dept. Health and Human Services, ADMHA; NIAAA 5600 Fishers Lane; Rockville, MD 20857.

This report is the result of a 1986 contract with NIAAA and NIDA to survey family practice departments and residencies about substance abuse teaching. It contains suggested learning objectives and an extensive bibliography of written and AV materials used by different programs. To obtain a copy, contact Roger Sherwood of

STFM (1-800-274-2236) of Claire Callahan of NIAAA at
(301) 443-1206.

D. AMA's Resource Kit on Physician Impairment

This kit includes a variety of information, including an annotated bibliography and AV resources listing. It is available for \$15. Contact:

American Medical Association
Dept Substance Abuse
535 N. Dearborn St
Chicago, IL 60610
(312) 645-5000

E The Busy Physician's Guide to the Management of Alcohol Problems

This popular pamphlet was edited by Jean Kinney of the Project Cork Institute with funding from the Office of Substance Abuse Prevention and the AMA. It is available from the Dept of Substance Abuse of the AMA. See contact listed in D. above.

II. AUDIOVISUAL MATERIALS

AV materials can be very useful for individual and group teaching, especially if followed by supervised discussion. The problem is that these are expensive to rent or purchase. Sometimes local chemical dependency treatment centers will keep a library of these materials which they use in their program. You may be able to borrow a tape from them or perhaps from another medical school department or residency program in your area.

In addition to the materials listed below, many other AV resources are listed in the report cited above in I. D.

A. Alcoholism and the Physician. Parts I-IV (Attitudes, Early Diagnosis, Confirming the Diagnosis, and the Physician's Role in Treatment).(color, 80 min)

This is an excellent videotape, divided in four twenty minute segments. Each segment contains vignettes of doctor-patient interactions, mostly in an office setting. It also includes a portrayal of an "intervention" with an adolescent patient. These were originally developed as part of Project Cork (see Networking Resources).

This tape, as well as many other written and AV materials, is probably most readily available from :

Hazelden Educational Materials
Pleasant Valley Road
Box 176
Center City, MN 55012
1-800-328-9000 (outside MN)

Ask for their most recent catalogue, which contains materials for both a lay and professional audience.

B. Soft is the Heart of a Child. (color, 30 min)

This is a videotape about the family disease of alcoholism. The family roles are somewhat stereotyped for educational purposes, but overall the tape is very moving and provokes much emotion and discussion. Be prepared to deal with audience participants who are adult children of alcoholics.

C. Our Brother's Keeper. (color, 30 min)

A vivid portrayal about an alcoholic physician and useful for teaching about the impaired physician.

D. Calling the Shots. (16 mm film, 30 min)

This film is about image based advertising by the alcohol industry. It is actually a film of a slide lecture. Once you adapt to this unusual format, the message is very powerful. This is a good example of the type of slide talk that a faculty member or resident could give at a local school. This is

essentially the same as a "DOC talk" for those familiar with the Doctors Ought to Care (DOC) organization.

Available from:

Cambridge Documentary Films
PO Box 385
Cambridge, MA 02139
(617) 354-3677

E. Prepared 35 mm slide sets on image-based alcohol advertising

The Doctors Ought to Care (DOC) organization has prepared slide sets with scripts to use for public presentation. These DOC talks illustrate the image-based techniques used by the advertising industry to promote products which are potentially harmful to health. These techniques contribute to a cultural context which subtly promotes and "enables" substance abuse problems. Specific topics include alcohol, drugs, tobacco, sex education and AIDS. The talks are entertaining and educational. They are useful for medical education and community health education.

For more information, contact:

DOC
1423 Harper St.
Augusta, GA 30912

F. Audio cassette tapes

Audiotape cassettes are available on a wide variety of topics. B & R Tapes offers a large selection of tapes of "lead" talks from some of the prominent figures in AA as well as instructional tapes by physicians and other treatment professionals. A catalogue is available. Contact:

B&R Tapes
PO Box 1464
Tifton, GA 31793

Hazelden also offers a large selection of audiotapes available, aimed primarily at the lay audience.

SECTION II

EXPERIENTIAL LEARNING

Physicians, like other adult learners, seem to learn best through experience. Certainly new skills and attitudes are more easily acquired in this active form of education. Several strategies for experiential learning are described below.

I. EXPERIENCES AT CHEMICAL DEPENDENCY TREATMENT CENTERS

A. "Immersion experience" at Willingway Hospital, Statesboro, GA

This is an intense one week live-in experience at a treatment center in rural southeastern Georgia. The unique feature of this facility is that it is a family enterprise, directed by a family physician, Al Mooney, MD. This structured rotation is utilized primarily for residents from several family practice residency programs in the Southeast. However, Willingway can sometimes accommodate family physician faculty members on a pre-arranged basis. Scheduled activities include rounding in the detox unit, morning report, group meetings, individual time with patients, and visits to a half-way house, AA and Al-Anon meetings. One of the highlights is getting to know the enthusiastic and charismatic Dr. Al Mooney. Stephen Flynn MD, Michael Fleming MD, and Lorne Campbell MD on the STFM Working Group have been "immersed" and would be happy to discuss this experience with interested faculty.

For more information, contact:

Al Mooney, MD
Director
Willingway Hospital
311 Jones Mill Rd
Statesboro, GA 30458
(912) 764-6236

B. "Immersion experience" at Serenity Recovery Center, Erie, PA.

This is a similar experience to that described above. Activities include detox rounds, group meetings at the inpatient residential unit, AA and Al-Anon meetings, and discussions with members of local support agencies. For physician faculty, methodologies of teaching substance abuse are discussed and a package educational program is presented if desired. Rotations can be arranged for residents and medical students as well as faculty. The program is directed by one of the members of the STFM Working Group, Lorne Campbell, M.D.

For more information, contact:

Lorne Campbell, MD
St. Vincent Health Center
232 West 25 St.
Erie, PA 16544
(814) 452-5478

C. Working with local treatment centers

Most faculty will be located in proximity to at least one treatment center. Medical and staff personnel at these institutions are often very receptive to an interested family physician. They are often willing to allow faculty and/or residents into their centers for learning experiences in exchange for the opportunity to showcase their programs. The development of key personal contacts in one or more local treatment centers is highly recommended.

Some residency programs will formally contract with local treatment centers to provide medical services to their clients. The involvement ranges from very extensive (eg. serve as the sole medical staff) to minimal (eg. providing an occasional consult). Several of the faculty development fellows are involved in these types of arrangements. Contact Paul Seale MD, Jerry Schulz MD, or Lorne Campbell MD (see STFM Substance Abuse Working Group membership list in Appendix A.)

II. FORMAL ROTATIONS AT RESIDENCY PROGRAMS

Some family practice residency programs have well established curriculum and rotations in substance abuse. Contact any nearby programs and inquire. Faculty are usually delighted to talk about successful rotations. You should be able to visit and possibly spend some time on the rotation.

In November 1988, the American Academy of Family Physicians published a directory of "Extramural Resident Electives Offered in Academic Family Medicine". Seven programs listed elective rotations in chemical dependency. These rotations are specifically listed for family practice residents, but the programs could be contacted directly about opportunities for faculty learning. For a current listing of these electives, call the AAFP at (800) 274-2237, ext. 5216.

III. ATTENDANCE AT SELF-HELP GROUP MEETINGS

The value of attending open meetings of such organizations as Alcoholics Anonymous and Al-Anon cannot be overstated. This is a powerful method to gain knowledge and change attitudes about chemically dependent people in recovery. There are many variants, but AA remains the most common and available of these meetings. For those who have never attended, the format is simple. Most open meetings have a "lead" speaker, a member who describes what his life was like on alcohol and/or drugs, how he recognized the problem and what his life is like since he has been sober. Because of the intense emotions often aroused, residents should have the opportunity to de-brief afterwards with a knowledgeable faculty member. Contact your local AA and Al-Anon offices listed in the white pages of your phone book. They will be happy to provide you a directory listing the times and locations of open meetings. Before sending residents, a faculty member should attend several local meetings. It may be educational to select a meeting with middle-class and professional members to disrupt the 'alcoholic' stereotype that many medical students and residents have.

IV. SUBSTANCE ABUSE FELLOWSHIPS

For those with serious career interest in the specialty of addiction medicine, a number of one and two year fellowships exist. These include clinical, teaching and often research training in substance abuse.

The Veterans Administration offers fellowships in 6 different sites across the country. These two year fellowships are open to board certified family physicians, as well as anesthesiologists, internists, neurologists, and psychiatrists.

A list of 20 fellowships was published in AMSAODD (American Medical Society on Alcohol and Other Drug Dependencies) News in Jan/Feb 1989. Addresses and contact people were listed. Not all of these are open to family physicians. Of particular note is a one year clinical fellowship at Willingway Hospital with Dr. Mooney (see above I. A) For more information, contact:

American Society of Addiction Medicine (ASAM) - formerly AMSAODD
12 West 21st St.
New York, NY 10010
(212) 206-6770

In addition to these full-time clinically oriented fellowships, the National Institute on Alcohol Abuse and Alcoholism (NIAAA) and the National Institute on Drug Abuse (NIDA) have funded several types of part-time fellowships for health professionals in academic settings. The authors of this manual participated in such a fellowship. For information about possible upcoming training experiences, contact:

Fran Cotter
Director of Health Professions Educations Program
NIAAA
5600 Fishers Lane, Room 16C-10
Rockville, MD 20857
(301) 443-0441

Dorynne Czechowicz, MD
NIDA
Office of Science
5600 Fishers Lane, Room 8A-54
Rockville, MD 20857
(301) 443-0441

SECTION III

CONTINUING MEDICAL EDUCATION

I. Faculty Development Course in Substance Abuse, sponsored by the Society of General Internal Medicine

This is an excellent three day course designed for general internists and family practitioners who have responsibility for teaching residents and students . The course addresses basic concepts in substance abuse, screening, interviewing patients, treatment modalities, and teaching skills. Methods include interviews with simulated patients, role-playing, case presentations, and small group discussions. This course was developed from a grant and will be presented in different locations around the country over the next few years. Tuition is free. Two STFM Working Group members, Drs. Stephen Flynn and Robert Funke, have taken this course and would be happy to discuss it.

For more information, contact:

Dr. JudyAnn Bigby
c/o Division of General Medicine and Primary Care
Brigham and Women's Hospital
75 Francis St, Boston, MA 02115
(617) 732-7063

II. Annual Review Course, sponsored by the American Society of Addiction Medicine (ASAM) - formerly American Medical Society of Alcoholism and Other Drug Dependencies (AMSAODD)

This is an intensive 3-4 day course given annually as a preparation for the ASAM certification examination in addiction medicine. The course is usually given in several different locations around the country in the fall each year. The course consists mostly of lectures, but includes opportunities for small group case discussions with facilitators. The syllabus is an excellent resource and is listed above in the written materials section. Although intended for physicians in the field of addiction medicine, it is also useful for primary care physicians.

ASAM also conducts a national meeting annually in the spring. The educational agenda varies and may be of interest to primary care educators. ASAM also conducts regional meetings and publishes a newsletter for members which advertises other substance abuse conferences.

For more information, contact:

ASAM
12 West 21st St
New York, NY 10010.
(212) 206-6770

III. Annual National Conference of the Association for Medical Education and Research in Substance Abuse (AMERSA)

The agenda for this meeting of medical educators includes paper presentations dealing primarily with substance abuse teaching and curriculum issues. This meeting is not for faculty primarily interested in clinical topics. However, for faculty with existing clinical knowledge, this is an excellent forum to interact with peers in other disciplines including psychiatry, internal medicine, and neurology about educational and research issues in substance abuse.

IV. Rutgers Summer School of Alcohol Studies

Education and Training Division
Center of Alcohol Studies
Smithers Hall
Rutgers University
New Brunswick, NJ 08903
(201) 932-2190

V. Miscellaneous

Chemical dependency treatment centers often sponsor educational conferences on a local, regional or even national level. These are usually directed at professionals in the field of chemical dependency but may be of interest to primary care physicians.

Regional and national meetings of AAFP and STFM occasionally offer papers, seminars, and workshops on substance abuse topics.

Also by joining ASAM, you will be put on a mailing list and receive frequent notices of chemical dependency conferences.

SECTION IV

NETWORKING RESOURCES

I. ORGANIZATIONS AND PEOPLE

A. STFM Working Group on Substance Abuse

This Working Group was established at the annual STFM meeting in April, 1988. The group evolved from the Faculty Development Fellowship in Substance Abuse, co-sponsored by STFM, NIAAA, and NIDA. It includes the original fellows and faculty along with many other members of STFM who have joined since then. A recent list of members and their areas of interest and expertise is included in Appendix A. The group has several subcommittees working in the areas of curriculum development, faculty development, and networking. The Working Group has used preliminary funding from the Office for Substance Abuse Prevention to develop a "Prevention/Intervention Kit" for use in a primary care physician's office. This kit, currently under development, will contain materials to assist physicians in screening, diagnosing, intervening and preventing substance abuse problems. In addition, the Working Group has recently (9/89) received a contract from HRSA to train family medicine residency faculty to incorporate substance abuse teaching into residency training curricula. For more information on the Working Group, contact the Chairperson, Mike Fleming or Steering Committee Member, Ardis Davis (see directory of Working Group members, Appendix A) or contact:

Society of Teachers of Family Medicine
8880 Ward Parkway
PO Box 8729
Kansas City, MO 64114
(800) 274-2237

B. American Society of Addiction Medicine (ASAM) - formerly the American Medical Society on Alcoholism and Other Drug Dependencies (AMSAODD)

ASAM is the major national and international organization for physicians who treat alcoholism and other drug dependencies. To become a member, the physician needs to have experience and interest in the field of alcoholism and/or drug dependence. However, family physicians do not need to work fulltime in this field to become members. The focus is clinical, educational, and political. ASAM sponsors educational programs, publishes a newsletter, and administers a certification exam, described below. In addition to the national organization, there are also some regional and state chapters, which foster local networking.

Since 1986, ASAM has administered an innovative certification examination for physicians who according to past president, Margaret Bean Bayog, MD, have "shown a mastery of the body of knowledge that has now been amassed in this field". The exam is administered annually (except 1989) and will require recertification every seven years. The

certification identifies physicians with special expertise in addiction medicine, but has no official status as board-certification.

Annual dues \$150

Contact:

ASAM
12 West 21st St
New York, NY 10010

C. Association for Medical Education and Research in Substance Abuse (AMERSA)

AMERSA is a organization for health professionals involved in teaching and research in substance abuse. The goal of this group is to increase the amount of curriculum activities devoted to substance abuse. The organization is multi-disciplinary, consisting of physicians, counselors, nurses, and other health professionals. The physicians represent various specialties, including internal medicine, psychiatry, neurology, pediatrics, and family medicine. It is similar in nature to STFM in the field of substance abuse.

Annual dues are \$75. For more information, contact:

AMERSA
Center for Alcohol and Addiction Studies
Brown University, Box G
Providence, RI 02912
(401) 863-3173

D. Society of General Internal Medicine (SGIM)

The Society of General Internal Medicine has a Substance Abuse Interest Group, consisting of some fifty members. A list of current members is included in Appendix B. This group has broad interests in all areas of substance abuse and primary care medicine. For further information, contact:

JudyAnn Bigby, MD
Brigham and Women's Hospital
75 Frances St.
Boston, MA 02115
(617) 732-7063

E. National Institute on Alcohol Abuse and Alcoholism (NIAAA)

NIAAA is one of three institutes within the Alcohol, Drug Abuse and Mental Health Administration (ADAMHA). The other two institutes are the National Institute on Drug Abuse (NIDA) and the National Institute of Mental Health (NIMH).

NIAAA has three operating offices and four divisions. The four divisions are:

- 1) Division of Basic Research

- 2) Division of Clinical and Prevention Research
- 3) Division of Biometry and Epidemiology
- 4) Division of Intramural Clinical and Biological Research

Divisions 1-3 above are extramural research entities that support a wide range of research efforts in their respective functional areas through grants, contracts and cooperative agreements. The fourth division is NIAAA's in-house research component and includes laboratories engaged in metabolic, preclinical and clinical research.

For more information about research ideas, grants, etc., contact:

John Allen, PhD
Chief of Treatment Branch
(301) 443-0796

Jan Howard, PhD
Chief of Prevention Research Branch
(301) 443-1677

Health Professions Education Program

Within the Division of Clinical and Prevention Research is the Health Professions Education Program through which STFM has recently completed two contracts. Programs to develop clinical training within medical institutions are currently underway. These projects involve some of the leading educators and schools working in the area of substance abuse. A directory of these projects with brief descriptions and contact people is included in Appendix C. Of interest is the curriculum project at Brown University, Project ADEPT. They are developing a series of educational modules which could be utilized in other settings. For more information about this or other specific projects, contact the project directors.

For more information about the general program, contact:

Fran Cotter, Director of Health Professions Education Program
NIAAA
5600 Fishers Lane Room 16C-10
Rockville, MD 20857
(301) 443-0441

F. National Institute on Drug Abuse (NIDA)

NIDA, as NIAAA, is one of the three institutes of the ADAMHA. Currently, NIDA is authorized as a research institute to study the causes and consequences of drug abuse; ways of improving our ability to treat and prevent drug abuse; and to collect information on the incidence and prevalence of drug abuse.

Current extramural and intramural research priorities are:
-to improve our ability to treat drug abusers
-to improve our ability to prevent drug abuse

-to improve our understanding of cocaine

Epidemiological information collected by NIDA is derived from three sources:

- Monitoring the Future Survey (High School Senior Survey)
- National Household Survey on Drug Abuse
- Drug Abuse Warning Network (DAWN)

The types of AIDS projects being funded by NIDA are:

- Comprehensive Aids Community Demonstration Grants
- Targeted AIDS Demonstration Grants
- Training and Informational Projects
- Research Projects

More detailed information about any of NIDA's programs can be obtained from the Policy and Legislative Branch, Room 10-A-03, Parklawn Bldg., 5600 Fishers Lane, Rockville, MD 20857 , tel. (301) 443-6460.

The contact person at NIDA for any specific questions about research, training, or other ideas is :

Dorynne Czechowicz, MD
NIDA
Office of Science
5600 Fishers Lane, Room 8A-54
Rockville, MD 20857
(301) 443-0441

Dr. Czechowicz highly encourages anyone to call her about ideas. She will explore your idea with you and direct you to the right person(s) within NIDA.

Research Training Program in Research Proposal Writing.

NIDA sponsors a special training program to better prepare people in preparing research proposals. Training programs whereby small groups of people are brought together for workshops are available. For more information, contact: Catherine Bolek (301) 443-0441

G. Office for Substance Abuse Prevention (OSAP)

The Office for Substance Abuse Prevention has three levels of activity:

- 1) Community-based demonstration projects and evaluation of these projects;
- 2) Technical assistance and conference support;
- 3) National training system development.

OSAP also supports the National Clearinghouse on Alcohol and Drug Information (see II.A below).

For more information, contact:

Jo Brady
OSAP
Room 9A-40
5600 Fishers Lane
Rockville, MD 20857
(301) 443-0369

H. Project Cork Institute, Dartmouth Medical School, Hanover, NH.

The Resource Center of the Project Cork Institute offers a number of services for physicians and educators interested in alcohol and alcoholism. They have prepared a number of audiovisual materials useful for teaching. In addition to the videotape "Alcoholism and the Physician" described previously, they have prepared a series of 35mm slides on different topics, including an Overview of the Medical Complications of Alcohol, Alcoholism and the Native American, and Alcohol Use, Abuse and Dependence. These slide sets may be ordered from.

Milner-Fenwick Publishers
(800) 432-8433

They also maintain a computerized database (CORK) on alcohol which is described below under information resources. The Project Cork Institute also publishes a newsletter, Alcohol Clinical Update, which lists recent additions to the data base and other articles, monographs and texts of interest. The cost is \$29 for 6 issues per year.

For more information about any of the activities and services of the Resource Center, contact:

Ginny Rolett
Director, Resource Center
Project Cork Institute
Dartmouth Medical School
Hanover, NH 03756
(603) 646-7540

I. National Association for Perinatal Addiction (NAPARE)

This organization of health professionals is committed to reducing alcohol and drug abuse during pregnancy. NAPARE sponsors education and research in this area. For more information, contact the Director:

Ira A. Chasnoff, M.D.
(312) 329-2512

J. The Center for Disease Control

For information about research initiatives in the area of AIDS and substance abuse, contact:

Steven Jones, M.D.
(404) 329-3311

K. National Center for Health Services Research

For information about funding for research in the area of health services, AIDS and substance abuse, contact:

Katy J. Benjamin
(301) 496-7543

L. Private foundations

A number of private foundations often fund education and research in the area of substance abuse, including the Kellogg Foundation, the Robert Wood Johnson Foundation, the Pew Memorial Trust, the JM Foundation, and the National Fund for Medical Education. Most universities and medical schools have a grants office which maintains a directory of these foundations, including contact persons and areas of funding interests.

M. Doctors Ought to Care (DOC)

DOC is a coalition of health professionals and other concerned individuals that is helping to educate the public, especially young people, about the major preventable causes of poor health and high medical costs. DOC's focus is the "killer habits" with particular emphasis on counter-acting the promotion of tobacco and alcohol. DOC is solely concerned with health promotion and has pioneered the concept of paid counter-advertising aimed at reducing lethal lifestyles.

For more information, write to:

DOC
1423 Harper St.
Augusta, GA 30912

II. INFORMATION RESOURCES

A. National Clearinghouse for Alcohol and Drug Information (NCADI)

The Clearinghouse is a service of the Office for Substance Abuse Prevention (OSAP) and the Alcohol, Drug Abuse and Mental Health Administration (ADAMHA). The Clearinghouse maintains a list of hundreds of articles and publications about alcohol and drug abuse. The majority are geared for the lay public, but some are oriented to health professionals. Single copies are generally available free of charge. NCADI will also do literature searches on specific alcohol and drug topics. They will search Medlars and other data bases and send you a

bibliography and abstracts at no charge. For a list of publications, order forms, and to get on their mailing list, contact:

NCADI
PO Box 2345
Rockville, MD 20852
(301) 468-2600

One publication worth requesting is the NCADI Resources Update (August 1987): Medical Education and Substance Abuse. This is an annotated list of curriculum guides and other resources pertaining to medical education in substance abuse, originally prepared by the Brown University Center for Alcohol and Addiction Studies.

Another worthwhile publication is Alcohol Resources Directory (Aug 1986): Self-Help Groups for Professionals and Special Populations.

B. Substance Abuse Librarians and Information Specialists (SALIS)

SALIS is an organization of 160 substance abuse information centers around the country. Some of these are hospital, medical school and other institutional libraries which provide special information services in the area of substance abuse. For the name of information centers near your location, contact:

Nancy Sutherland
Alcohol and Drug Abuse Institute
University of Washington
Seattle, WA
(206) 543-0937

C. Center of Alcohol Studies, Rutgers University

The Center of Alcohol Studies at Rutgers maintains several data bases about alcohol use. Of particular interest is the Ralph G. Connor Alcohol Research Reference File (CARF). CARF is an archive of instruments that have been used in studies of various aspects of drinking behavior and alcoholism.

For more information, contact:

Center of Alcohol Studies
Smithers Hall
Rutgers University
Allison Rd.
Piscataway, NJ 08854
(201) 932-2190

D. Computer Data Bases

1. Medline

This is the old stand-by and still the best single source according to many. Medline is one of several databases under the National Library of Medicine's MEDLARS (Medical Literature Analysis and Retrieval System). Medline is a comprehensive index to national and international medical literature. It covers all aspects of biomedicine, including the biological and physical sciences, delivery of health care, dentistry, chemicals and drugs, as well as humanities and information science as they relate to biomedicine. Most faculty have access through hospital/med school libraries or personal computer telecommunication programs such as GRATEFUL MED, AMA-Net, or BRS Colleague (see below).

2. BRS Colleague

Colleague provides access to a number of medical data bases including Medline, two alcohol databases (ETOH and CORK) and one drug abuse database (DRUG). The cost to register is \$95 for an individual and there are service charges depending on the service utilized.

One of the databases available through Colleague is ETOH, the Alcohol and Alcohol Problems Science database produced by the National Institute on Alcoholism and Alcohol Abuse (NIAAA). ETOH consists of a over 80,000 records from alcohol related scientific sources in the United States and abroad. It includes journal articles, books and monograph reports, conference papers and proceedings, dissertations and information about funding sources. ETOH covers all aspects of alcoholism research, psychology, psychiatry, physiology, biochemistry, epidemiology, sociology, animal studies, treatment, prevention, education, accidents and safety, legislation, employment, labor and industry, and public policy. ETOH is updated monthly.

Another database available through BRS Colleague is Alcohol Information for Clinicians and Educators (CORK). CORK is a data base of selected alcohol/alcoholism information, developed by the Project Cork Resource Center at Dartmouth Medical School. The Cork collection includes references not indexed in the standard medical data bases. Materials are selected for interest to physicians and medical educators, with limited basic science references.

Another useful database available through Colleague is Drug Information (DRUG). This database is maintained by the School of Pharmacy at the University of Minnesota and indexes 37 journals in the area of alcohol and other drug abuse.

For more information about BRS Colleague, call: (800) 468-0908.

3. Quick Facts

Quick Facts is an electronic bulletin board system operated by the Alcohol Epidemiologic Data System, under contract to the Division of Biometry and Epidemiology of NIAAA. Quick Facts provides access to tables which contain the latest alcohol-related data, eg alcohol use by age, race, sex. Files are added to and updated as new data becomes available. This might be a good source of information when preparing for a lecture. Quick Facts also includes a public messages section to provide a forum for discussion. Best of all, the system is free to users. Contact Fred Stinson, the Quick Facts System Operator:

Alcohol Epidemiologic Data System
CSR, Inc
1400 Eye St NW
Suite 600
Washington, DC 20005
(202) 842-7600

4. CRISP

This is an index of all current federally funded grants. You may search for any projects in areas of your interest and contact the project directors to get more information. This is up-to-date, pre-publication information.

For more information, call: (301) 496-7543

E. Journals

1. Substance Abuse (AMERSA)

This is the journal of the Association of Medical Education and Research in Substance Abuse (AMERSA). The journal publishes the proceedings from the annual AMERSA meeting as well as other original educational and research articles.

2. Alcoholism - Clinical and Experimental Research

This journal is published by the Research Society on Alcoholism and includes a wide variety of scientific works. Articles are generally concerned with basic science research and may be of limited interest to the primary care physician.

3. Journal of Alcohol Studies

This journal is published by the Rutgers Alcohol Center and is the most rigorous of the substance abuse journals. Articles include original research which is frequently pertinent to primary care physicians.

4. Drug Abuse Update

A brief monthly publication which provides abstracts of articles in lay and professional literature about drug abuse. Subscription rate is \$25 per year. Contact:

National Drug Information Center of Families in Action
2296 Henderson Mill Rd, Suite 204
Atlanta, GA 30345.

5. Drug Abuse & Alcoholism Newsletter

This brief and practical newsletter is available free from:

Vista Hill Foundation
3420 Camino del Rio North, Suite 100
San Diego, CA 92108
(619) 563-1770

SECTION V

OTHER TEACHING RESOURCES

- I. Task Force on Substance Abuse: Family Medicine Curriculum Guide to Substance Abuse. Society of Teachers of Family Medicine, 8880 Ward Parkway, PO Box 8729, Kansas City, MO.

This useful monograph contains much information about clinical aspects of substance abuse as well as many teaching strategies. It was published in 1984 so some references are not current. The text is printed in a poor rendition of dot matrix, but if you overcome this obstacle, this manual is a good resource.

- II. NCADI Resource Update: Medical Education and Substance Abuse

This NCADI publication is an updated, annotated bibliography of articles pertaining to clinical and educational aspects about alcohol and alcoholism. It can be obtained free of charge from the:

National Clearinghouse for Alcohol and Drug Information
PO Box 2345
Rockville, MD 20852.
(301) 468-2600

- III. Resource Manual for Alcohol and Other Drug Abuse Education in Family Medicine Medical School and Residency Programs. US Dept. Health and Human Services; ADMHA; NIAAA; 5600 Fishers Lane; Rockville, MD 20867.

This report is the result of a contract with NIAAA and NIDA to survey family practice departments about substance abuse teaching. It contains suggested learning objectives and an extensive bibliography of written and audiovisual materials used for teaching. To obtain a copy, call Roger Sherwood of STFM at (800) 274-222 or Claire Callahan of NIAAA at (301) 443-1206.

IV. Society of Teachers of Family Medicine. Substance Abuse Curriculum Development in Family Medicine: An Instructors' Manual in Two Parts. 1989

This report is also the result of a contract with NIAAA and NIDA. It describes the Faculty Development in Substance Abuse project conducted in 1987-89. It includes useful techniques for faculty development which may be utilized in other settings. It also includes the ten curriculum projects of the fellows. These curricula cover different areas of teaching, including undergraduate, graduate, and continuing medical education with a variety of clinical topics. Plans for distribution of the complete report are uncertain at this time, but again try contacting Roger Sherwood or Ardis Davis. (see III above) A list of the fellows and their curriculum projects is included in Appendix D.

V. Interactive Computer - simulated Cases

For his curriculum project, one of the Faculty Development Fellows in Substance Abuse, Rich Brown, created three computer software programs for teaching medical students and residents about primary care management of substance abuse. These programs focus on early diagnosis of alcoholism, physician attitudes and screening questionnaires. He is developing additional modules on the diagnostic interview, discussing the diagnosis of substance abuse with the patient and alcohol withdrawal and in addition has funding from the Pew Trusts to construct an interactive video curriculum on the same topics. For more information, contact:

Rich L. Brown, MD
Dept of Family Medicine
Jefferson Medical College
401 Curtis
Philadelphia, PA 19107
(215) 928-8363

VI. Syllabus from Immersion week at Willingway

This syllabus is intended for use during the intensive "immersion week" experience at Willingway Hospital, which was described in the Experiential Learning section above. It contains schedules, articles and handouts pertaining to this experience. Although it refers specifically to Willingway in some cases, the material can be very helpful in planning similar experiences in local treatment settings. For more information, contact:

Al Mooney, MD
Director
Willingway Hospital
311 Jones Mill Rd
Statesboro, GA 30458
(912) 764-6236

VII. Fleming M, Hunt V. Alcohol Detoxification Protocol. University of Wisconsin.

This is a practical and brief manual designed for use by house offices, medical students and nurses. It was prepared by Working Group member Mike Fleming, along with Vernon Hunt MD from the Dept of Medicine at the University of Wisconsin. It contains specific protocols for treating alcohol withdrawal, with background information and references. It describes a specific protocol using Valium loading , although there are certainly other commonly used and valid protocols. This manual has not been published. For more information, contact:

Mike Fleming, MD
Dept of Family Medicine
University of Wisconsin
777 South Mills St
Madison, WI 53715
(608) 263-9953

VIII. Other Curriculum Projects under NIAAA's Health Professions Education Program

For a list and brief description of curriculum projects in other primary care disciplines, see Appendix C. (These descriptions are from 11/88 and are, at present, dated as all of these projects have been completed.) Of interest is the Project Adept at Brown University. They have developed a series of individual teaching modules on different substance abuse topics, which may be utilized in other institutional settings. For more information, contact the project directors.

IX. Adolescent Alcoholism: Recognizing, Intervening and Treating.
Department of Family Medicine, Ohio State University, 1987.

This is a set of educational materials for teaching about adolescent alcohol abuse. The materials consist of 6 instructional monographs, a faculty guide, audiocassettes and videotapes. The cost is \$25 for the written materials, \$15 for the audiocassettes, and \$165-225 for the videotapes (depending on format). Each monograph was written by different authors and the overall quality is uneven.

For more information, contact:

Adolescent Alcoholism Series
Department of Family Medicine
Ohio State University
456 W 10th Ave
Columbus, OH 43210

**STFM SUBSTANCE ABUSE WORKING GROUP MEMBERSHIP
LIST
SEPTEMBER, 1989**

***=STEERING COMMITTEE MEMBER**

AMODEI, Nancy PhD
Department of Family Medicine
University of Texas Health Science Center
7703 Floyd Curl Drive
San Antonio, TX 78284
(512) 270-3911

Interests: -Patient Education
 -Clinical work with substance abusers
Expertise: -As Above

BAIRD, Macaran A. MD
Department of Family Medicine
SUNY Health Science Center
750 E. Adams St.
Syracuse, NY 13210
(315) 473-4437

Interests: -Early diagnosis and intervention techniques
 -Family-centered approach to alcoholism/substance abuse
 -Prescription drug abuse/the "difficult patient"
Expertise: -Family-centered approach to alcoholism/substance abuse

BARRY, Kristine A. PhD
Department of Family Medicine
University of Wisconsin Medical School
777 South Mills St.
Madison, WI 53715
(608) 263-4550

BLONDELL, Richard D. MD *
Department of Family Practice
University of Louisville
530 So. Jackson St.
Louisville, KY 40292
(502) 588-1995

BOTELHO, Rick MD *
Family Medical Center
University of Rochester
885 South Ave.
Rochester, NY 14618
(716) 442-7470 (work)
(716) 442-6114 (home)

Interests: -Unique contribution of family medicine to screening,
 assessment and management of substance abuse in primary
 care
Expertise: - Development of workshops focusing on process issues.

BROWN, Rich L. MD *
Jefferson Medical College
401 Curtis
Philadelphia, PA 19107
(215) 928-8363

Interests: -Early identification
-Engaging and maintaining patients in treatment
-Impaired physicians and medical trainees
Expertise: -Process, behavioral skills as above
-Attitudes
-Teaching methods
-Computer-Assisted Instruction

CAMPBELL, Lorne MD
Serenity - St. Vincent Health Center
232 W. 25th St.
Erie, PA 16544
(814) 452-5556

Interests: -Medical management
-Inpt. and outpt. rehabilitation of all substances
-Eating disorders and other addictions
-Development of educational strategies
-Impaired professionals; intervention strategies and prevention
Expertise: As Above

COGGAN, Peter G. MD
Department of Family Medicine
University of California at Irvine
101 The City Drive South
Orange, CA 92668
(714) 634-5171

COOLEY, Frederick B. PhD
Department of Family Medicine
SUNY at Buffalo
1001 Humboldt Pkwy.
Buffalo, NY 14208
(716) 887-8226

Interests: -Applying innovative family therapy approaches to chemically dependent families, using the Stanton's University of Rochester model. I am active clinically in this area.
-Consulting with alcohol clinics, helping them integrate family-based programming with more traditional individually-focused disease models.
-Teaching residents (and physicians) with a hands-on approach to drinking problems, utilizing skills taught in Behavioral Science seminars and a mandatory chemical dependency training week as an intern.

Expertise: -My areas of expertise tend to be aligned with what I'm interested in - see above.
-Although I do "classical" Vern Johnson-type alcohol interventions, my work has evolved into treating chemical dependency in the context of multi-generational (2-3) families. The payoff is dramatically reduced scapegoating of the drinker and increased treatment efficiency. The alcohol clinical started in 1985 as a response to resident referrals and is now a 5-counselor, 8-person outpatient clinic.

CUPP-CRISS, Beth LMSW
Director, Behavioral Sciences
Family Practice Residency
3243 E. Murdock
Wesley Medical Center Suite 303
Wichita, KS 67208
(316) 688-3071

Interests: -Curriculum development for residency education
Expertise: -Family therapy

DAVIS, Ardis K. MSW *
Department of Family Medicine RF-30
University of Washington School of Medicine
Seattle, WA 98195
(206) 543-9425 (work)
(206) 546-9638 (home)

Interests: -Integrated substance abuse curriculum across primary care specialties in medical education
-Development of knowledge and skill objectives for medical education which progress from core knowledge and skills in medical school to increasingly more sophisticated levels in residency and CME training programs.
- Faculty development strategies for the primary care physician

Expertise: -Substance abuse curriculum development in family medicine: content and strategies for implementation
-Resources, materials and networking

DEERHAKE, Patsy MA
Mt. Carmel Family Practice Center
1300 Dublin Rd.
Columbus, OH 43214

Interests: -Our program does not have a specific substance abuse curriculum. I am interested in learning about what other residency programs are doing. I am interested in innovative teaching approaches which are based upon a family practice perspective.

Expertise: -My area of expertise is counseling Adult Children of Alcoholics. I have worked with the general population as well as with medical students and residents. A large percentage of doctors are ACOAs and may have no insight into the effects of growing up in an alcoholic family.

FINCH, Jim MD
Department of Family Medicine
Duke University Medical Center
407 Crutchfield St.
Durham, NC 27704
(919) 471-4421

Interests: -Curriculum development in substance abuse, particularly residency and faculty development

-Educational interventions with practicing clinicians

Expertise: -Clinical practice in substance abuse (inpatient, residential, and consultation)
-Curriculum development

FLEMING, Michael F. MD * (CHAIR)
Department of Family Medicine
University of Wisconsin Medical School
777 S. Mills St.
Madison, WI 53715
(608)263-9953 (Work)
(608)263-4550 (Work)
(608)836-5934 (Home)

FLYNN, Steve P. MD *
Family Practice Center
Fairview General Hospital
18200 Lorain Ave.
Cleveland, OH 44111
(216)476-7086

Interests: -Diagnosis: screening, establishing and working with denial in the primary care setting
-Impaired physician

-Research

Expertise: -Diagnosis
-Research methodology

FRIEMOTH, Jerry A. MD

Associate Director, Undergraduate Division

Department of Family Medicine

University of Cincinnati Medical Center

231 Bethesda Ave.

Cincinnati, OH 45267-0582

(513) 872-4066

Interests: -Predoctoral and residency education

Expertise: As above

FUNKE, Robert H. MD

Kingsport Family Practice Center

201 Cassell Drive

Kingsport, TN 37660

(615) 246-6202

Interests: -Very general, but enjoy teaching noncoercive intervention techniques

GELBERG, Lillian MD

UCLA Department of Family Medicine

115 N. Doheny Dr. #318

Los Angeles, CA 90048

(213) 206-8929 (Work)

(213) 550-1820

GOODMAN, Benjamin W. MD

Medical Arts Clinic

24 Second Ave. NE

Hickory, NC 28601

(704) 328-2231

GRAHAM, Toni RN MSW

Department of Family Medicine

Case Western Reserve University

Bolwell Health Center - Family Medicine

2078 Abington Rd.

Cleveland, OH 44106

(216)844-3791

Interests: -Education of residents in early detection of alcohol/drug abuse

-Treatment of ACOAs

Expertise: As Above

HENRY, Rebecca PhD

Office of Medical Education Research and Development

Michigan State University

A 209 East Fee Hall

East Lansing, MI 48824

(517)353-2037

Interests: -Evaluation strategies and how they can be applied to educational interventions

-Research possibilities

Expertise: -Curriculum design

-Evaluation procedures

-Research designs

HOEGSBERG, Don, PharmD
Montefiore Medical Center
Department of Family Medicine
3412 Bainbridge Ave.
Bronx, NY 10467-2490
(212)920-4678

HOHMANN, Lynda Karig PhD MD
Albany Medical College
Department of Family Practice A-46
112 T-Smith Anne
Albany, NY 12208
(518) 445-5506

KUZEL, Tony MD
Department of Family Practice
Medical College of Virginia
Fairfax Family Practice Center
3650 Joseph Siewick Dr. #400
Fairfax, VA 22033
(703) 391-2020 or 391-2041
Interests: -The development of clinical skill in diagnosis and limited
intervention for family physicians

KIRKPATRICK, Robert MD
210 Jackson Suite 503
Memphis, TN 38105
(901)527-7421
Interests: -Residency teaching in substance abuse
-Occupational medicine
-Cost-effectiveness of substance abuse treatment programs and
exploring innovative options
Expertise: As above
-Strong clinical and administrative background in substance
abuse treatment (past medical director of a care unit)

KOLLISH, Donald MD
Department of Community and Family Medicine
Dartmouth Medical School
Hanover, NH 03756
(603)646-7767 or 638-2372

LANE, Patty MD
Department of Family Medicine
University of Texas Health Science Center
7703 Floyd Curl Drive
San Antonio, TX 78284
(512)270-3911
Interests: -Patient education materials
Expertise: As above

LEFEVER, Nancy Q. MD
1601-B Owen Drive. F.A.H.E.C.
Fayetteville, NC 28304
(919) 323-1152
Interests: -Resident education
Expertise: As Above

MAIO, Joseph PhD
Director of Behavioral Sciences
Family Practice Residency Program
St. Joseph Medical Center
128 Strawberry Hill Ave.
PO Box 1222
Stamford, CT 06904
(203)353-2000
Interests: -Clinical and teaching, particularly in terms of making the
initial diagnosis and intervention

MALY, Rose C. MD
UCLA Academic Fellow
2821 Dell Ave.
Venice, CA 90291
(213) 206-1299 (Work)
(213) 306-1645 (Home)
Interests: -Epidemiology of addictive disorders across cultures, looking
for associative factors
-Exerimental interventions with physicians to increase
awareness, frequency of diagnosis and treatment
Expertise: -Curriculum development in chemical dependency in Family
Practice Residencies
-Teaching FP residents re: chemical dependency diagnosis and
treatment
-Diagnosis and treatment of alcoholism at the primary care level

MARKLAND, Linda MD
Area Health Education Center
University of Arkansas
241 W. Spring
Fayetteville, AR 72701
(501) 521-8260

McGANN, Patricia Karen MD MSPH

Dept. Family Medicine
Bowman Gray School of Medicine
300 Hawthorne Ave.
Winston-Salem, NC 27103
(919) 748-2230

Interests: -Research-screening
-Impaired health care providers
Expertise: As above

MOONEY, Al J. MD

311 Jones Mill Rd.
Statesboro, GA 30458
(912)764-6236

OTTENHEIMER, Howard PhD

Bethesda Family Practice Center
4411 Montgomery Road
Cincinnati, OH 45212
(513)531-6720

Interests: -Family systems approaches to treatment
-Adolescent substance abuse
-Family therapy
Expertise: As above

SALVADOR, Hector PhD

Family Practice Residency Training Program
White Memorial Medical Center
1720 Brooklyn Ave.
Los Angeles, CA 90033

SCHMIDT, Priscilla M.

University of Connecticut
Depts. of Psychiatry and Family Medicine
1 Cedar Hill Rd.
W. Simsbury, CT 06092
(203) 666-6951

SCHULZ, Jerry MD * (CO-CHAIR)

Family Practice Residency Training Program
St. Paul-Ramsey Medical Center
640 Jackson St.
St. Paul, MN 55101
(612) 221-3540

Interests: -Intervention, cocaine, acute and chronic detoxification
12 step (AA) programs, outpatient (clinic) assessment and
management of CD patients
-Impaired professional programs
Expertise: As above

SEALE, J Paul MD *

Department Family Practice
University of Texas Health Sciences Center
7703 Floyd Curl Dr.
San Antonio, TX 78284
(512)270-3911

Interests: -Early diagnosis of substance abuse
-Intervention strategies for primary care physicians
-Screening instruments (for alcoholism) (especially women)
-Substance abuse among hispanics

Expertise: As above

SHERWOOD, Roger CAE

STFM
8880 Ward Parkway
PO Box 8729
Kansas City, MO 64114
(800) 274-2237

SHORE, Bill MD

University of California at San Francisco
Family Medical Center
SFGH
995 Potrero
Building 80 Ward 83
San Francisco, CA 94110
(415) 821-8702

SITORIUS, Mike *

Department of Family Medicine
University of Nebraska Medical Center
42nd and Dewey Ave.
Omaha, NE 68105
(402) 559-7249

Interests: -Residency curriculum: content and implementation
-Use/misuse of minor tranquilizers
-Practical and usable screening tools for chemical dependency
other than just alcohol
-Grade school/Jr. High School education programs: When,Where,
What, How?

STROHM, Maureen MD

USC School of Medicine
Parkview Medical Bldg. B-205
1420 San Pablo Ave.
Los Angeles, CA 90033
(213) 742-5883

Interests: -Curriculum development, teaching, faculty development

Expertise: As above

TOWNSEND, Janet MD LIAISON TO STFM BOARD
Montefiore Medical Center
3412 Bainbridge Ave.
Bronx, NY 10467
(212) 920-4678

TUMBLIN, Martha MEd.
Department of Family Medicine
University of South Carolina
171 Ashley Ave.
Charleston, SC 29425
(803) 792-2411
Interests: -Curriculum development and teaching in medical education
-Impaired physicians
Expertise: -Clinical: therapist in addictions

WAXMAN, Dael MD
Family Medicine Ctr.
885 South Ave.
Rochester, NY 14620
(716) 442-7470 (work)
(716) 889-5227 (home)
Interests: -Faculty development/attitudes
Expertise: -Worked for 2 years in substance abuse treatment center
(family systems orientation)

WOODSON, Cheryl PsyD
Department of Family Medicine
1750 NE 168th St. Room 301
North Miami Beach, FL 33162
(305)949-4000 Ext. 301
Interests: -Curriculum development
-Cocaine addiction, alcoholism and personality attributes and
mental illness

WOOLFSON, Michael MD
Brown University
Alcohol Studies
Box G
Providence, RI 02912
(401)457-3079

SGIM Substance Abuse Interest Group

Thomas Delbanco, M.D.
Division of General Medicine
Beth Israel Hospital
330 Brookline Avenue
Boston, MA 02215

Booker Bush, M.D.
Division of General Medicine
Beth Israel Hospital
330 Brookline Avenue
Boston, MA 02215

Mark Aronson, M.D.
Division of General Medicine
Beth Israel Hospital
330 Brookline Avenue
Boston, MA 02215

Henrietta Barnes, M.D.
58 Robeson Street
Jamaica Plain, MA 02130

Kenneth Robinson, M.D.
Vanderbilt University Medical Center
Primary Care Center
Division of General Internal Medicine
Nashville, TN 37232

Anderson Spickard, M.D.
Vanderbilt University Medical Center
Primary Care Center
Division of General Internal Medicine
Nashville, TN 37232

Taylor Hayes, M.D.
Vanderbilt University Medical Center
Primary Care Center
Division of General Internal Medicine
Nashville, TN 37232

Michael Phillips, M.D.
Department of Medicine
St. Vincent's Medical Center of Richmond
355 Bard Avenue
Staten Island, NY 10310

Louis Gottlieb, M.D.
St. Mary's
56 Franklin Street
Waterbury, CT 06702

Marlene Price, M.D.
135 Eastern Parkway
Brooklyn, NY 11238

David Lewis, M.D.
Center for Alcohol Studies
Brown University, Box G
Providence, RI 02912

William Lerner, M.D.
The Division of General and Preventive Medicine
Suite 609
Medical Education Building
University of Alabama at Birmingham
Birmingham, AL 35294

Michele Cyr, M.D.
Rhode Island Hospital
593 Eddy Street
Providence, RI 02902

Anne Mouton, M.D.
Rhode Island Hospital
593 Eddy Street
Providence, RI 02902

Jack Ende, M.D.
University Hospital
75 East Newton Street
Boston, MA 02118

Gene Bishop, M.D.
Presbyterian Medical Center of Philadelphia
51 North 39th Street
Philadelphia, PA 19104

Donald Girard, M.D.
Chief, Division of General Medicine
Oregon Health Sciences University
3181 S.W. Sam Jackson Road
Portland, OR 97201

Mark L. Kraus, M.D.
Medical Director, Joseph Center
St. Mary's Hospital
56 Franklin Street
Waterbury, CT 06702

JudyAnn Bigby, M.D.
Brigham and Women's Hospital
75 Francis Street
Boston, MA 02115

William Clark, M.D.
Bath Memorial Hospital
Bath, ME 04530

Ira Mintzer, M.D.
Department of Medicine
Cambridge Hospital
1493 Cambridge Street
Cambridge, MA 02139

Bruce Gould, M.D.
88 Wheeler Road
Princeton, MA 01541

L. Randol Barker, M.D.
Francis Scott Key Medical Center
4940 Eastern Avenue
Baltimore, MD 21224

Frank P. Furlano, M.D.
Gundersen Clinic
1836 So. Avenue
LaCrosse, WI 54601

James Florek, M.D.
Worcester Memorial Hospital
119 Belmont Street
Worcester, MA 01605

Pam Charney, M.D.
Primary Care Internal Medicine
SN34
Jacobi Hospital
Pelham Parkway & East Chester Road
Bronx, NY 10461

Basil B. Clyman, M.D.
1272 Hillgreen Drive
Los Angeles, CA 90035

Lawrence S. Linn, Ph.D.
Department of Medicine
B261 Factor Building
UCLA
Los Angeles, CA 90024

James LoGerfo, M.D.
Department of Medicine, RG-20
University of Washington
Seattle, WA 98105

Ronald St. Louis, M.D.
Mountefiore Medical Center
111 East 210th Street
Bronx, NY 10467

Olivia Patch, M.D.
Division of General Medicine/
Primary Care
Cook County Hospital
1835 W. Harrison
Chicago, IL 60612

Mary E. (Dolly) Wheat, M.D.
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Project Summaries
Health Professions Curriculum Demonstration Program

- 1 Brown University School of Medicine
Providence, Rhode Island
Project Director: David C. Lewis, M.D.

This project involves the active participation of 14 faculty representing Departments of Internal Medicine, Family Medicine, Community Medicine, Pediatrics, Psychiatry and OB-GYN. This core group of faculty has established minimum knowledge and skill competencies across all six disciplines and identified sixteen instructional modules addressing such areas as Assessment and Diagnosis, Prevention, Treatment Options/Referral, Family Issues, Withdrawal, Physiology and Pharmacology, Intoxication and Overdose. The instructional modules are designed as a learning hierarchy so that they can be implemented in a sequential manner across different disciplines and trainee levels. During the implementation, a summative program evaluation is being conducted and a research design is being developed for conducting an outcome evaluation of the training program.

2. Johns Hopkins Department of Pediatrics
Baltimore, Maryland
Project Director: Hoover Adger, Jr., M.D.

A Working Committee of Pediatric faculty have assessed the substance abuse teaching needs within the existing curriculum and prioritized teaching objectives and content. Substance abuse instruction is being integrated in the department's ongoing clinical teaching program, including two core lecture series, a noon Conference Series and Grand Rounds. Pediatric faculty involved in implementing the curriculum have participated in a faculty development program to improve their knowledge and clinical teaching skills. Educational methods include role playing, videotaped interviews and case management problems and lectures. Outcome evaluation measures for the program will assess changes in the prevalence of substance abuse problems in the pediatric population and the detection rate of house staff and residents.

3. Johns Hopkins Department of Internal Medicine
Baltimore, Maryland
Project Director: David Levine, M.D.

The model program design, developed by a Working Committee of Internal Medicine Faculty, is based on educational-behavioral principles including the use of such teaching methods as small group discussion, performance feedback, and role play with simulated patients. Evaluation of the effectiveness of the curriculum will include assessment of changes in trainees knowledge, attitudes, skills and practice behavior. Baseline studies on trainee practice patterns with respect to identification and intervention with alcohol and drug abuse problems have been conducted. Curriculum components designed for faculty, house staff and medical students will emphasize early identification, state-of-the-art screening approaches; motivation into care; intervention and counseling skills, and referral to treatment.

4. Society of Teachers of Family Medicine (STFM)
Kansas City, Missouri
Co-Project Directors: Peter Coggan, M.D.
Roger Sherwood

Ten Family Medicine physician faculty from different medical schools across the country have been identified to participate in a two year faculty development training program. The curriculum involves a combination of group workshops conducted by STFM and targeted educational activities within each fellow's own medical institution. Training has a two fold focus: (1) achievement of knowledge and clinical skill competencies in alcohol and drug abuse and (2) development of teaching skills, including curriculum design, development and use of syllabus materials and teaching strategies. Individual fellows will be evaluated, using pre and post test measures of substance abuse attitudes and mastery of knowledge and skill learning objectives.

5. Medical College of Virginia
Richmond, Virginia
Project Director: Sidney Schnoll, M.D.

This project involves faculty from the Departments of Primary Care-Internal Medicine, Pediatrics, Psychiatry and OB/GYN, in the design of a curriculum in alcohol and drug abuse which links the clinical research and clinical teaching expertise in these departments. A team of twenty faculty participated in a two day workshop designed to identify curriculum needs in alcohol and drug abuse and to develop interdisciplinary clinical research projects which could be implemented as an integral part in the curriculum. The faculty committee will review the existing alcohol and drug abuse content and determine how a revised curriculum can address current overlaps and gaps. Teaching strategies will include special projects that are relevant to the interdisciplinary clinical research program. Each stage of curriculum development and implementation will be evaluated and carefully documented, to facilitate replication efforts by other medical institutions.

6. University of Alabama
Birmingham, Alabama
Project Director: William D. Lerner, M.D.

An integrated curriculum in alcohol and other drug abuse is being developed in the departments of Medicine, Psychiatry and Family Medicine. The proposed curriculum will include an expansion of the current preclinical curriculum and the development of a one month intensive clinical experience in the newly established Center for Impaired Health Professionals. This clinical rotation is offered as part of the Acting Internship program to undergraduate students. Residents and faculty from the three participating specialty departments will rotate through this clinical teaching site. Evaluation of the proposed curriculum will assess trainee knowledge and skills, as well as the impact of the model curriculum on other teaching departments who receive consultation and assistance from the alcohol and drug abuse program faculty.

7. Vanderbilt University Medical Center
Nashville, Tennessee
Project Director: Andrew Spickard, Jr., M.D.

This project involves faculty from the Departments of Internal Medicine, Psychiatry, Pediatrics and OB/GYN in the design of the model alcohol and drug abuse curriculum. A Working committee has established minimum knowledge and skill competencies for primary care specialties and developed a matrix of teaching objectives for each of the four disciplines. Following an assessment of the existing pre clinical, clinical and residency curriculum, faculty are developing curriculum components for each level of training. Curriculum modules for residency and faculty training are being developed separately for each of the four disciplines. Evaluation of the curriculum will include knowledge, skill and attitude assessments for each level of training as well as an assessment of the process of developing and implementing changes in the curriculum.

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STFM Fellowship Curriculum Projects

PRE-DOCTORAL

- R. Funke:** Promoting Medical Student Recognition of Chemical Dependency
- R. Brown:** Improving Early Diagnosis of Substance by Medical Students (Interactive Computer Modules)

RESIDENCY

- S. Flynn:** Alcoholism: Diagnosis and Intervention for Family Physicians
- B. Goodman:** The Impaired Health Professional: A Curriculum for PGY-1 Residents
- P. Seale:** Planning and Implementing a Part-time PGY-1 Resident Rotation in Substance Abuse
- L. Campbell:** One Week Packaged Flexible Module for Family Practice Residents

FACULTY

- J. Finch:** A Curriculum in Substance Abuse for Family Practice Faculty
- T. Kuzel:** A Brief Intervention Strategy for Faculty Development in Chemical Dependency Syndrome

ALL LEVELS

- J. Schulz:** How to Stay Sober and Serene in Dealing with Alcoholic Patients
- M. Fleming:** Alcohol and Drug Withdrawal: Medical Management

APPENDIX D